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		(Column 1)		(Column 2)	(Column 3)						
ENDMENT'S.		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		Minus	••	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.18(b))	•	Minus	***			X \$=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$=		OR	+ \$=	
· .							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.